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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Linda First name	First name
	Write the name that is on your government-issued picture identification (for example, your driver's	Middle name Sims	Middle name
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last	First name	First name
	8 years		
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		-	
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- 4033	XXX - XX-
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor	1 Linda First Name	Middle Name Last N		Case number <i>(if kno</i>	iwn)	_
		About Debtor 1:		About Debto	r 2 (Spouse Only in	a Joint Case):
and	/ business names	I have not used any business name	es or EINs.	I have not	used any business nam	nes or EINs.
Nur	ntification mbers (EIN) you re used in the last	Business name		Business nan	ne	
	ears	Business name		Business nan	ne	
	ude trade names and g business as names	EIN		EIN		
		EIN		EIN		
5. Wh	ere you live	44005 72 11 4		If Debtor 2 live	es at a different addre	·ss:
		14305 Parnell Ave Number Street		Number	Street	
		Harvey Illinois City State	60426 Zip Code	City	State	Zip Code
		Cook County		County		
		If your mailing address is different above, fill it in here. Note that the co notices to you at this mailing address.			mailing address is di Note that the court will dress.	
		Number Street		Number	Street	
		City State	Zip Code	City	State	Zip Code
	y you are posing this district	Check one:		Check one:		<u> </u>
	ile for bankruptcy	Over the last 180 days before filing lived in this district longer than in an	this petition, I have ny other district.		ast 180 days before filing s district longer than in a	
		I have another reason. Explain. (See	28 U.S.C. §§ 1408.)	I have ano	other reason. Explain. (Se	ee 28 U.S.C. §§ 1408.)

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De	btor 1 Linda	Sims		Case number (if kno	wn)
	First Name	Middle Name Last N	lame		
Pai	rt 2: Tell the Court Abo	ut Your Bankruptcy Case			
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of Bankruptcy (Form B2010)). Also, go to  Chapter 7 Chapter 11 Chapter 12 Chapter 13			
	How you will pay the fee	more details about how you may cashier's check, or money order may pay with a credit card or chemay	y pay. Typically, if you if your attorney is seek with a pre-printenents. If you choose the in Installments (Ord (You may request to, waive your fee, and lies to your family signst fill out the Application.	ou are paying the submitting your p ed address. this option, sig fficial Form 103, this option only d may do so only ze and you are u	he clerk's office in your local court for efee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
	Have you filed for bankruptcy within the last 8 years?	✓ No.  Yes. District  District  District	When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  Yes. Debtor  District  Debtor  District	When When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
	Do you rent your residence?	No. Go to line 12.  ✓ Yes. Has your landlord obtained at No. Go to line 12.  ✓ No. Go to line 12.  ✓ Yes. Fill out <i>Initial Statem</i> this bankruptcy pet	nent About an Eviction		<i>t You</i> (Form 101A) and file it with

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Sims Debtor 1 Linda \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Linda
 Sims
 Case number (if known)

 First Name
 Middle Name
 Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Linda		Sims	Case number (if kno	wn)
Part 6: First Name  Answer These Que	Middle Name estions for Reporting	Last Name		
16. What kind of debts do you have?	16a. Are your debt "incurred by a No. Go to Yes. Go to The your debt money for a bo No. Go to Yes. Go to Yes. Go to	s primarily consumer on individual primarily for line 16b. In line 17. In line 17. In line 18 primarily business de line 16c. In line 17.	r a personal, family, or hous	ebts that you incurred to obtain he business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing ur expenses ar			roperty is excluded and administrative ured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	<u> </u>	000-5,000 001-10,000 0,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,0 \$100,001-\$500 \$500,001-\$1 m	000	1,000,001-\$10 million 10,000,001-\$50 million 50,000,001-\$100 million 100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,0 \$100,001-\$500 \$500,001-\$1 m	000	1,000,001-\$10 million 10,000,001-\$50 million 50,000,001-\$100 million 100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
For you	correct.  If I have chosen to fi of title 11, United Stunder Chapter 7.  If no attorney represout this document, I request relief in acc I understand making	ile under Chapter 7, I am tates Code. I understand sents me and I did not pa I have obtained and reac cordance with the chapt g a false statement, cond	n aware that I may proceed, d the relief available under e ay or agree to pay someone d the notice required by 11 the er of title 11, United States cealing property, or obtaining	Code, specified in this petition.  ng money or property by fraud in
		ankruptcy case can resu 152, 1341, 1519, and 35		or imprisonment for up to 20 years, or
	/s/ Linda Sims		<b>*</b>	
	Signature of Debt	or 1	Signature of	of Debtor 2
	Executed on _	12/20/2017 MM / DD / YYYY	Executed	on

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Debtor 1 Linda		Sims	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	ler Chapter 7, 11, 12, d	or 13 of title 11, Unite	ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. § 34	2(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the inf	ormation in the sched	ules filed with the petition is incorrect.
attorney, you do not	· ·	, ,		'
need to file this page.	/s/ Alicia Haro		Date	12/20/2017
	Signature of Attorney for	or Debtor	M	M / DD / YYYY
	. <b>.</b>			
	Alicia Haro			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	nue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone		Email address	aharo@semradlaw.com
	Bar number		State	

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Linda		Sims
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	sankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

	Check if	this	is	an
_	amende	d filii	ng	

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$3,029.00
1b. Copy line 62, Total personal property, from Schedule A/B	<u>·                                     </u>
1c. Copy line 63, Total of all property on Schedule A/B	\$3,029.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$2,000.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$200.00
	\$13,052.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$15,252.00
Your total liabilities	
Your total liabilities	
Part 3: Summarize Your Income and Expenses	
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I)	\$2,074.00
Part 3: Summarize Your Income and Expenses	\$2,074.00

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Debtor 1 Linda Sims \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,334.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$2,890.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$2,890.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your case:		
Debtor 1	Linda First Name Mic	Sims Idle Name Last Name	
Debtor 2 (Spouse, if fi	ling) First Name Mic	Idle Name Last Name	
United Sta	ates Bankruptcy Court for the: Northern	District of Illinois	
Case num	nber	(State)	
, ,	al Form 106A/B		Check if this is an amended filing
	dule A/B: Property		aniended ming
In each ca category v responsibl write your	ategory, separately list and describe iten where you think it fits best. Be as comple le for supplying correct information. If m name and case number (if known). Answ	ns. List an asset only once. If an asset fits in more the ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to this wer every question. I, Land, or Other Real Estate You Own or Have	are filing together, both are equally form. On the top of any additional pages,
	_	rest in any residence, building, land, or similar prop	
7. bo you	No. Go to Part 2  Yes. Where is the property?	. , , , , , , , , , , , , , , , , , , ,	
1.1	Street address, if available, or other descrip	tion  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?
	Number Street  City State Zip Code	Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)
		Other information you wish to add about this property identification number:	item, such as local
If you	own or have more than one, list here:  Street address, if available, or other descrip	what is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?
	Number Street  City State Zip Code	Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this property identification number:	Check if this is community property (see instructions)

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Debtor 1	Linda		Sims	Case numbe	r (if known)	
	First Name	Middle Name	Last Name			
1.3 Stre	et address, if available, or of	[	What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nun City	nber Street State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature or interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [	Who has an interest in the property  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and and Other information you wish to add a	other	(see instructions)	mmunity property
	the dollar value of the po we attached for Part 1. W	rtion you own for a	oroperty identification number: all of your entries from Part 1, inclu ere. ▶	ding any entrie	s for pages	
Do you ow you own th 3. Cars, va	nat someone else drives. If uns, trucks, tractors, sport uns	equitable interest you lease a vehicle,	t in any vehicles, whether they are also report it on Schedule G: Executor cycles	-	-	
✓ Yes	5					
3.1	Make Model:	Plymouth Grand Voyager	Who has an interest in the propone.  Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Year: Approximate mileage: Other information: 1999 Plymouth Grand Vo	1999 218000 yager	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an	d another	Current value of the entire property? \$2075.00	Current value of the portion you own? \$2075.00
			Check if this is community	property (see		
3.2	Make Model: Year:		Who has an interest in the propone.  Debtor 1 only	perty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community		Current value of the entire property?	Current value of the portion you own?
			instructions)			

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	Linda First Name	Middle Name	Sims Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage:		Who has an interest in the one.  Debtor 1 only	property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	· · · · · · · · · · · · · · · · · · ·
	Other information:	<del></del> .	Debtor 2 only Debtor 1 and Debtor 2 or	nly	Current value of the entire property?	Current value of the portion you own?
			At least one of the debtor	rs and another		
			Check if this is communications:	nity property (see		
3.4	Make Model:		Who has an interest in the one.	property? Check	Do not deduct secured the amount of any secu	•
	Year:		Debtor 1 only			aims Secured by Propert
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?
			At least one of the debtor	rs and another		
			Check if this is commu	nity property (see		
Exar		•	instructions) er recreational vehicles, other t, fishing vessels, snowmobiles,	•		
Exar	nples: Boats, trailers, motors No Yes	•	er recreational vehicles, other	motorcycle accessor	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:	•	er recreational vehicles, other t, fishing vessels, snowmobiles, Who has an interest in the	motorcycle accessor	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>
Exar	nples: Boats, trailers, motors No Yes Make Model:	•	er recreational vehicles, other t, fishing vessels, snowmobiles, Who has an interest in the one.	motorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Propert Current value of the
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 2 ond	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert
Exar	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only At least one of the debtor	motorcycle accessor property? Check  hly rs and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Propert Current value of the
Exar	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 2 ond	motorcycle accessor property? Check  hly rs and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule hims Secured by Propert Current value of the
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions)  Who has an interest in the one.	property? Check  hly s and another  nity property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured	red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. F
4.1	Make Model: Other information:  Make Model: Make Model: Make Model: Model: Model: Model: Model: Model:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) Who has an interest in the one.	property? Check  hly s and another  nity property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu	claims on Schedule control of the portion you own?  claims or exemptions. Fured claims on Schedule
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)  Who has an interest in the one.  Debtor 1 only	property? Check  hly s and another  nity property (see	Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Control of the secured the amount of any secu Creditors Who Have Clate Clate Control of the secured t	red claims on Schedule ims Secured by Propert  Current value of the portion you own?  claims or exemptions. Fired claims on Schedule ims Secured by Propert
4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only	property? Check  The property of the property? Check  The property of the property? Check  The property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule hims Secured by Propert Current value of the portion you own?  claims or exemptions. F
4.1	Make Model: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: Other information:	•	who has an interest in the one.  Debtor 1 and Debtor 2 or At least one of the debtor instructions)  Who has an interest in the one.  Debtor 1 and Debtor 2 or Check if this is communinstructions)  Who has an interest in the one.  Debtor 1 only  Debtor 2 only  Debtor 1 only  Debtor 2 only	property? Check  Inly Is and another Inity property (see  property? Check	Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Control of the secured the amount of any secu Creditors Who Have Clate Clate Control of the secured t	red claims on Schedule ims Secured by Propert  Current value of the portion you own?  claims or exemptions. It is claims on Schedule ims Secured by Propert  Current value of the
4.1	mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:	•	who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)  Who has an interest in the one. Debtor 1 only	property? Check  Inly Its and another Inity property (see Inity property? Check  Inly Its and another Inity see	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule ims Secured by Propert  Current value of the portion you own?  claims or exemptions. It is claims on Schedule ims Secured by Propert  Current value of the

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D	ebtor 1	1 Linda	Sims Case number (if known)	
		First Name	Middle Name Last Name	
Pa	rt 3:	Describe Y	our Personal and Household Items	
D	o you	ı own or hav	e any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		_	and furnishings liances, fumiture, linens, china, kitchenware	
$\overline{\mathbf{Z}}$	Yes.	Describe	Living Room Set, Dining Room Set, Bedroom Set	\$700.00
		etronics ples: Televisions	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
<b>✓</b>	Yes.	Describe	TVs, Cell Phone, Laptop, Tablet	\$200.00
		•	ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; in, or baseball card collections; other collections, memorabilia, collectibles	
<b>✓</b>	No Yes.	Describe		] ———
	-	ples: Sports, ph	rts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments	
<b>✓</b>	No Yes.	Describe		
		earms	es, shotguns, ammunition, and related equipment	
	No	p. 66. 1 . 6. 6. 6, 1	oo, onotgano, anniamion, and routed equipment	
뇓		Describe		7
ш	100.	20001120		
			clothes, furs, leather coats, designer wear, shoes, accessories	_
Ш	No	Describe	Lload Clathing	
⊻			Used Clothing	\$50.00
		•	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, r	
⊻	No	<b>.</b>		7
Ш	Yes.	Describe		
	Examı	n-farm animal ples: Dogs, cats		
✓	No			
	Yes.	Describe		
1		y other person	al and household items you did not already list, including any health aids you did not list	
✓	No			_
	Yes.	Describe		
			lue of all of your entries from Part 3, including any entries for pages you have attached number here	\$950.00

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Debt	tor 1 Linda First Name	Middle Name	Sims Last Name	Case number (if known)	
Part 4		Financial Assets	<u> </u>		
		ny legal or equitable interest	in any of the follow	ving?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	<b>✓</b> No	ave in your wallet, in your home, in	·	d on hand when you file your petition  Cash:	
17.		savings, or other financial accounts; institutions. If you have multiple acc		shares in credit unions, brokerage houses, stitution, list each.	
	No ✓ Yes		Institution name:		
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:	Direct Express Debit (	Card (Government Debit Card)	\$4.00
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		s, or publicly traded stocks s, investment accounts with brokers	age firms, money marke	et accounts	
	Yes	Institution or issuer name:			
19.	Non-publicly traded an LLC, partnership,		ed and unincorporate	ed businesses, including an interest in	
	✓ No				
	Yes. Give specific			% of ownership:	
	information about them				

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Debt	tor 1 Linda		Sims	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instrumen		ers' checks, promissory no	tes, and money orders.	
21.	Retirement or pens Examples: Interests in		B(b), thrift savings accounts	s, or other pension or profit-sharing plans	
	✓ No	, , , , , , , , , , , , , , , , , , , ,	(-,,	,	
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
	osparatoly:	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		sed deposits you have made so the ts with landlords, prepaid rent, pu			
	<u> </u>	Gas:			
		Heating oil:			
		Security deposit on rental uni	t:		
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contrac	t for a periodic payment of money	to you, either for life or for	r a number of years)	
	✓ No  Yes	Issuer name and description:			

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Debt	or 1 Linda	Sims Case number (if known)	
0.4	First Name	Middle Name Last Name	
24.		an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition pro 530(b)(1), 529A(b), and 529(b)(1).	gram.
	✓ No Yes	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.		able or future interests in property (other than anything listed in line 1), and rights or powers for your benefit	
	✓ No  Yes. Desc	cribe	
26.		oyrights, trademarks, trade secrets, and other intellectual property ternet domain names, websites, proceeds from royalties and licensing agreements	
	✓ No	ionion de main co, mezoneo, processe nom rojaneo ane nocionig agreemente	
	Yes. Desc	cribe	
27.		anchises, and other general intangibles uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	<b>✓</b> No		
	Yes. Desc	cribe	
Mor	ney or proper	rty owed to you?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or proper		portion you own?
			portion you own?  Do not deduct secured
	Tax refunds on No Yes. Give s	specific information Federal:	portion you own?  Do not deduct secured
	Tax refunds on  No Yes. Give s abou you a	specific information ut them, including whether already filed the returns  Federal: State:	portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds on  No Yes. Give s abou you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on  No Yes. Give s abou you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s abou you a and t  Family suppor Examples: Past	specific information ut them, including whether already filed the returns the tax years  Local:  rt  tt due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s abou you a and t  Family suppor Examples: Past	specific information ut them, including whether already filed the returns the tax years  Local:  rt et due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s abou you a and t  Family suppor Examples: Past	specific information  It them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s abou you a and t  Family suppor Examples: Past	specific information ut them, including whether already filed the returns the tax years  rt tt due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett specific information  Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  lement  \$0.00 \$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s abou you a and t  Family suppor Examples: Past	specific information ut them, including whether already filed the returns the tax years  rt st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett specific information  Alimony: Maintenance: Support:	## sportion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past No Yes. Give s  Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years	## sportion you own? Do not deduct secured claims or exemptions.  ### \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past No Yes. Give s  Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years	## sportion you own? Do not deduct secured claims or exemptions.  ### \$0.00
28.	Tax refunds on  ✓ No  Yes. Give s about you a and t  Family suppor Examples: Past ✓ No  ☐ Yes. Give s  Other amount Examples: Unp Soc	specific information ut them, including whether already filed the returns the tax years	## sportion you own? Do not deduct secured claims or exemptions.  ### \$0.00

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Deb <sup>1</sup>	or 1 Linda		Sims	Case number (if known)	
	First Name	Middle Name	e Last Name		
31.	Interests in insurance Examples: Health, disab		alth savings account (HSA); credit,	homeowner's, or renter's insurance	
	No Yes. Name the insure of each policy and		Company name:	Beneficiary:	Surrender or refund value:
32.	If you are the beneficiar property because some	y of a living trust, expect	someone who has died proceeds from a life insurance poli	cy, or are currently entitled to receive	
33.	Examples: Accidents, er		you have filed a lawsuit or made urance claims, or rights to sue	e a demand for payment	
34.		unliquidated claims o	f every nature, including counter	rclaims of the debtor and rights	
	v No Yes. Describe				
35.	Any financial assets y	ou did not already list			
	Yes. Describe				
36.		-	m Part 4, including any entries f		\$4.00
Part	5: Describe Any B	usiness-Related Pro	operty You Own or Have an l	Interest In. List any real estate in Pa	ırt 1.
37.	Do you own or have a	ny legal or equitable in	nterest in any business-related p	roperty?	
	No. Go to Part 6. Yes. Go to line 38.				Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable of No Yes. Describe	or commissions you al	ready earned		
39.			e, modems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, ele	ectronic devices
	Yes. Describe				

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Deb	tor 1 Linda	Sims	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, equipn	nent, supplies you use in business, and tools of your to	rade	
	<b>✓</b> No			
	Yes. Describe			
		<del>_</del>		
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
		<del>_</del>		
42.	Interests in partnerships or	r joint ventures		
	✓ No			
	Yes. Give specific	Name of entity:	% of ownership:	
	information about			
	them			
43.	Customer lists, mailing lists,	, or other compilations		
	<b>√</b> No			
		e personally identifiable information (as defined in 11 U.S.C	C. § 101(41A))?	
	☐ No			
	Yes. Describe			<del></del>
44.	Any business-related prope	erty you did not already list		
	<b>✓</b> No			
	Yes. Give specific			-
	information			<del>-</del>
		·		-
				<del>-</del>
				_
				<del></del>
45 A	dd the dollar value of all of y	your entries from Part 5 including any entries for pag	es vou have attached	
		your entries from Part 5, including any entries for pag e		
<u> </u>				
Part	If you own or have an intere	and Commercial Fishing-Related Property Yo est in farmland, list it in Part 1.	u Own or Have an Interest In.	
46.	Do you own or have any leg	gal or equitable interest in any farm- or commercial fi	shing-related property?	
	No. Go to Part 7.			urrent value of the
				ortion you own?
	Yes. Go to line 47.			o not deduct secured claims rexemptions
47	Farm animals		OI.	
.,.	Examples: Livestock, poultry,	, farm-raised fish		
	No No			
	Yes. Describe			
	L 100. Describe			

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Debto		inda irst Name	Middle Name	Sims Last Name	Case number (if known)	
48.	Crop	s-either growing o				
		No Yes. Describe				
49.	<b>✓</b> N	No	oment, implements, machinery, fixtu	res, and tools of trade		
	⊔` _	Yes. Describe				
50.	Farm	n and fishing suppl	lies, chemicals, and feed			
	lacksquare	No Yes. Describe				
51.	Any f	farm- and comme	rcial fishing-related property you did	not already list		
		No Yes. Describe				
			l of your entries from Part 6, includin		ou have attached	
Part 7		Nasariha All Pro	perty You Own or Have an Inter	est in That You Did No	at List Above	
			perty of any kind you did not already		TEIST ABOVE	
١.,			s, country club membership			
		No Yes. Give specific				]
		nformation				
54. Ad	d the	e dollar value of al	l of your entries from Part 7. Write tl	nat number here		▶
Part 8	: L	ist the Totals of	Each Part of this Form			
55. <b>P</b> a	art 1:	: Total real estate	, line 2		<b>&gt;</b>	
56. <b>p</b> a	art 2	total vehicles, lin	e 5	\$2075.00		
57. <b>Pa</b>	art 3:	Total personal an	d household items, line 15	\$950.00		
58. <b>Pa</b>	art 4:	Total financial as	sets, line 36	\$4.00		
59. <b>P</b> a	art 5:	: Total business-re	elated property, line 45	<del> </del>		
60. <b>P</b>	art 6:	: Total farm- and f	ishing-related property, line 52			
61. <b>P</b>	art 7:	: Total other prop	erty not listed, line 54			
62. <b>T</b> o	otal p	personal property.	Add lines 56 through 61	\$3029.00	Copy personal property total ▶	+ \$3029.00
						\$3029.00
63. <b>To</b>	tal o	f all property on S	chedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:							
Debtor 1	Linda		Sims				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name	<u>.</u>			
United States Bankruptcy Court for the:		Northern	District of Illinois				
Case number (If known)			(State)				

### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Clair	n as Exempt						
1.	3 · · · · · · · · · · · · · · · · · · ·							
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)					
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(	2)					
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption				
		Copy the value from Schedule A/B						
	Brief description:	\$2,075.00	\$75.00, \$0.00	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)				
	Plymouth Grand Voyager, 1999, 1999 Plymouth Grand Voyager		\$75.00; \$0.00  100% of fair market value, up to any applicable statutory limit	-				
	Line from Schedule A/B: 03							
	Brief description:	\$4.00		735 ILCS 5/12-1001(b)				
	Other financial account,	Ψ4.00	\$4.00	_				
	Direct Express Debit Card (Government Debit Card)		100% of fair market value, up to any applicable statutory limit					
	Line from Schedule A/B: 17							
3.	Are you claiming a homestead exempti (Subject to adjustment on 4/01/19 and even		375? cases filed on or after the date of adjustment.)					
	✓ No	and by the array of the same	This 4 OAE do a before a conflict this conf					
	Yes. Did you acquire the property covi	erea by the exemption w	vithin 1,215 days before you filed this case?					
	Yes							

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Debtor			Case number (if known)	
Part 2:	First Name Midd  Additional Page	die Name La	ast Name	
line	ef description of the property and e on Schedule A/B that lists this perty	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Line	ef coription: Living Room Set, Dining Room Set, Bedroom Set e from nedule A/B: 06	\$700.00	\$700.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line	ef ecription: TVs, Cell Phone, Laptop, Tablet e from nedule A/B: 07	\$200.00	\$200.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line	ef scription: Used Clothing e from nedule A/B:  11	\$50.00	\$50.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)

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		DC	ocument Page 22 of	70		
Fill in th	is information to identify your ca	se:				
Debtor	1 Linda		Sims			
	First Name	Middle Name	Last Name			
Debtor : (Spouse, i		Middle Name	Last Name			
United 9	States Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case nu (If known)						
Offic	cial Form 106D			J		Check if this is an amended filing
Sch	edule D: Credito	ors Who Ha	ve Claims Secure	ed by Prop	ertv	12/15
			e are filing together, both are equ			
more sp	ace is needed, copy the Additio		nber the entries, and attach it to t	• •		
	nd case number (if known).					
1. Do	any creditors have claims se				and the state of the same	
L	4		with your other schedules. You hav	e nothing else to repo	ort on this form.	
	Yes. Fill in all of the information	n below.				
Part 1:	List All Secured Claims					
	ist all secured claims. If a credit			Column A	Column B	Column C
	separately for each claim. If more th n Part 2. As much as possible, list	•	ticular claim, list the other creditors	Amount of claim	Value of	Unsecured
	name.	tire ciairris iir aipriabeticai	order according to the creditor s	Do not deduct the value of collateral.	collateral that supports	<b>portion</b> If any
					this claim	. ,
	Title Max	Describe the property	that secures the claim:	\$2,000.00	\$2,075.00	\$0.00
1	Creditor's Name 933 E. Sibley Blvd	Plymouth Grand Voyage	jer			
_	Number Street	As of the date you file	, the claim is: Check all that apply.			
_		Contingent				
<u></u>	Oolton IL 60419	Unliquidated				
	State ZIP Code  Who owes the debt? Check one.	Disputed				
	Debtor 1 only	Nature of lien. Check	all that apply.			
Ī	Debtor 2 only	An agreement you	made (such as mortgage or secured			
Ī	Debtor 1 and Debtor 2 only	car loan)				
Ì	At least one of the debtors		as tax lien, mechanic's lien)			
	and another	Judgment lien from	n a lawsuit			
L	Check if this claim relates to a community debt	Other (including a	ight to offset)			
[ [	Date debt was	Last 4 digits of accou	nt number			

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$2,000.00

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			D	ocument	Page 23 (	of 70			
Fill in t	this inforr	nation to identify your c	ase:						
Debto	r 1	Linda First Name	Middle Name	Sims Last	Name	-			
Debto: (Spouse	r 2 e, if filing)	First Name	Middle Name	Last	Name	-			
United	States B	ankruptcy Court for the:	Northern	District of	Illinois (State)				
Case r	number n)				(Otate)	-			
Offic	cial Fo	orm 106E/F					Chec	ck if this is an	amended filing
Scł	nedu	le E/F: Cre	ditors Who	<b>Have</b>	Unsecur	ed Claims	;		12/15
Form 1 claims	06Å/B) a that are tries in th ).	ny executory contracts nd on Schedule G: Exe listed in Schedule D: C ne boxes on the left. At All of Your PRIORIT	cutory Contracts and Ureditors Who Hold Clai each the Continuation	Inexpired Leas ms Secured by Page to this page	es (Official Form 1 Property. If more	06G). Do not include a space is needed, copy	any creditors y the Part yo	s with partial u need, fill it	lly secured out, number
2. L	No. 6 Yes.  ist all of sted, iden as much a	editors have priority un no to Part 2.  your priority unsecured tify what type of claim it is so possible, list the claims on Page of Part 1. If mon	I claims. If a creditor has s. If a claim has both pri in alphabetical order acc	s more than one ority and nonproording to the co	ority amounts, list the reditor's name. If you	hat claim here and show u have more than two p	both priority	and nonprior	ity amounts.
(i	For an exp	planation of each type of	claim, see the instruction	ns for this form	n the instruction bo	oklet.)	Total	Priority	Nonpriority
							claim	amount	amount
2.1	Priority C Po Box 7 Number	reditor's Name '346 Street		When was th	of account number te debt incurred? te you file, the clai	n/a	\$200.00	\$200.00	\$0.00
	Debt	hia Pennsylvar State urred the debt? Check of or 1 only or 2 only or 1 and Debtor 2 only	Zip Code	Continge Unliquide Disputed Type of PRIC	RITY unsecured c	3			
	At lea	ast one of the debtors an	d another	Taxes an governm	d certain other debts ent	s you owe the			

Check if this claim relates to a community debt

Is the claim subject to offset?

✓ No Yes Claims for death or personal injury while you were

Other. Specify Notice Only

intoxicated

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Debte	or 1 Linda	Sims	Case number (if known)	
_	First Name Middle Name	Last Name		
Part :	2: List All of Your NONPRIORITY Unsecur	ed Claims		
[	Oo any creditors have nonpriority unsecured clain  No. You have nothing to report in this part. Su	• •	e court with your other schedules.	
<b>4.</b> L	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl	aim. For each claim	er of the creditor who holds each claim. If a creditor has more the listed, identify what type of claim it is. Do not list claims already inclipant 3. If you have more than four priority unsecured claims fill out to	uded in Part 1.
			1	Total claim
4.1	AARON SALES & LEASE OW		Last 4 digits of account number 8691 -	\$0.00
	Nonpriority Creditor's Name 1015 COBB PLACE BLVD NW		When was the debt incurred? 6/2007	
	Number Street		As of the date you file the claim in Check all that apply	
			As of the date you file, the claim is: Check all that apply.  Contingent	
		)144	Unliquidated	
	•	o Code		
	Who incurred the debt? Check one.  Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community	debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify 006 Lease	
	✓ No			
	Yes			
4.2	AD ASTRA RECOVERY SERV		Last 4 digits of account number 9628 -	\$541.00
	Nonpriority Creditor's Name 7330 W 33RD ST N STE 118		When was the debt incurred? 12/2014	
	Number Street			
			As of the date you file, the claim is: Check all that apply.	
	WICHITA Kansas 67	'205	Contingent	
	,	o Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	<u> </u>		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another		Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community	debt	debts	
	Is the claim subject to offset?		001 Collection; Collecting for ORIGINAL CREDITOR: SPEEDY	
	✓ No		Other. Specify CASH 123	
	Yes			
4.3	ARS ACCOUNT RESOLUTION Nonpriority Creditor's Name		Last 4 digits of account number 3302	\$535.00
	PO BOX 459079		When was the debt incurred? 9/2013	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	-		Contingent	
		3345	Unliquidated	
	City State Zi Who incurred the debt? Check one.	o Code	Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	At least one of the debtors and another		divorce that you did not report as priority claims	
	Check if this claim relates to a community	debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		001 Collection; Collecting for	
	<b>✓</b> No		ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	
	Yes		· ·	

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 Debtor 1 First Name
 Linda
 Sims
 Case number (if known)

 Last Name
 Last Name

Part 2	art 2: Your NONPRIORITY Unsecured Claims - Continuation Page							
	After listing any entries on this page, number them beginning wit	h 4.5, followed by 4.6, and so forth.	Total claim					
4.4	ATG CREDIT	Last 4 digits of account number 8796	\$1,335.00					
	Nonpriority Creditor's Name 1700 W CORTLAND ST STE 2	When was the debt incurred? 11/2012						
	Number Street	As of the date you file, the claim is: Check all that apply.						
		Contingent						
	CHICAGO Illinois 60622 City State Zip Code	Unliquidated						
	Who incurred the debt? Check one.	Disputed						
	Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or						
	At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar						
	Check if this claim relates to a community debt	debts						
	Is the claim subject to offset?  No	Other. Specify  Other. Specify						
	Yes							
4.5	Cash Advance Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$1,500.00					
	25954 Eden Landing Rd	When was the debt incurred?n/a						
	Number Street	As of the date you file, the claim is: Check all that apply.						
		Contingent						
	Hayward California 94545	Unliquidated						
	City State Zip Code	Disputed						
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or						
	At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar						
	Check if this claim relates to a community debt	debts  Other. Specify  Pay Day Loan						
	Is the claim subject to offset?	Other. Specify Pay Day Loan						
	<b>✓</b> No							
	Yes							
4.6	DIVERSIFIED	Last 4 digits of account number 6147	\$1,500.00					
	Nonpriority Creditor's Name POB 551268	When was the debt incurred? 4/2017						
	Number Street	As of the date you file, the claim is: Check all that apply.						
		Contingent						
		Unliquidated						
	JACKSONVILLE Florida 32255 City State Zip Code	Disputed						
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:						
		Student loans						
	Debtor 2 only	Obligations arising out of a separation agreement or						
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	divorce that you did not report as priority claims						
	불	Debts to pension or profit-sharing plans, and other similar debts  Collection; Collecting for ORIGINAL CREDITOR: 11						
	Check if this claim relates to a community debt							
	Is the claim subject to offset?	Other. Specify COMCAST						
	Yes							

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 Debtor 1 First Name
 Linda
 Sims
 Case number (if known)

 Last Name
 Last Name

	Alter fishing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim				
1.7	ENHANCED RECOVERY CO L	,,	\$1,576.00				
+./	Nonpriority Creditor's Name	Last 4 digits of account number 5375	\$1,576.00				
	8014 BAYBERRY RD	When was the debt incurred? 2/2017					
	Number Street	As of the date you file, the claim is: Check all that apply.					
	JACKSONVILLE Florida 32256	Contingent					
	City State Zip Code	Unliquidated					
	Who incurred the debt? Check one.  Debtor 1 only	Disputed					
	Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	<u> </u>	Student loans					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or					
	At least one of the debtors and another	divorce that you did not report as priority claims					
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	Is the claim subject to offset?	001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT					
	✓ No	Other. Opedity Official Act of Edition. Similar					
	Yes						
.8	ENHANCED RECOVERY CO L	Last 4 digits of account number 0908	\$141.00				
	Nonpriority Creditor's Name						
	8014 BAYBERRY RD  Number Street	When was the debt incurred? 3/2014					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		Contingent					
	JACKSONVILLE Florida 32256	Unliquidated					
	City State Zip Code	Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	Debtor 1 only	Student loans					
	Debtor 2 only	불					
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
	Check if this claim relates to a community debt	001 Collection; Collecting for					
	Is the claim subject to offset?	ORIGINAL CREDITOR: AT T					
	✓ No	Other. Specify WIRELINE					
	Yes						
0			\$9F0.00				
.9	Family Christian Health Center Nonpriority Creditor's Name	Last 4 digits of account number	\$850.00				
	713 E. 143rd St	When was the debt incurred?n/a					
	Number Street	As of the date you file, the claim is: Check all that apply.					
		— Contingent					
		Unliquidated					
	DoltonIllinois60419CityStateZip Code	<u> </u>					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans					
	Debtor 1 only						
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
	Check if this claim relates to a community debt	Other. Specify Medical Bill					
	Is the claim subject to offset?						

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Sims Debtor 1 Linda Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2008 1645 Ogden Street Number As of the date you file, the claim is: Check all that apply. Contingent Downers Grove Illinois 60515 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ 36 Automobile Is the claim subject to offset? **✓** No Yes 4.11 MIDNIGHT VELVET \$92.00 Last 4 digits of account number 4546 Nonpriority Creditor's Name 1112 7TH AVE When was the debt incurred? 8/2015 Number As of the date you file, the claim is: Check all that apply. Contingent MONROE Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No Yes NCA 4.12 \$911.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 550 327 WEST FOURTH STREET When was the debt incurred? 6/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent HUTCHINSON 67504 Kansas Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: 01 No Other. Specify AARONS SALES AND LEASE

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Debtor 1 Linda Sims Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 NCA \$769.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 550 327 WEST FOURTH STREET When was the debt incurred? 6/2013 Number As of the date you file, the claim is: Check all that apply. Contingent HUTCHINSON Kansas 67504 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **| ORIGINAL CREDITOR: 01 ✓** No Other. Specify AARONS SALES AND LEASE Yes 4.14 \$412.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 550 327 WEST FOURTH STREET When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent HUTCHINSON 67504 Kansas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **✓ ORIGINAL CREDITOR: 01 ✓** No Other. Specify AARONS SALES AND LEASE Yes NHHELC/GSM&R 4.15 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 3420 When was the debt incurred? 12/2009 Number As of the date you file, the claim is: Check all that apply. Contingent CONCORD 03302 New Hampshire Unliquidated City Zip Code Who incurred the debt? Check one Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Sims Debtor 1 Linda Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 NHHELC/GSM&R \$0.00 Last 4 digits of account number 7649 Nonpriority Creditor's Name PO BOX 3420 When was the debt incurred? 12/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent CONCORD New Hampshire 03302 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.17 U S DEPT OF ED/GSL/ATL \$1,548.00 Last 4 digits of account number 1740 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 12/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.18 \$1,342.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 12/2009 Number As of the date you file, the claim is: Check all that apply. Contingent 30301 ATLANTA Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Sims Debtor 1 Linda Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 5609 When was the debt incurred? 12/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent 75403 **GREENVILLE** Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.20 US DEP ED \$0.00 Last 4 digits of account number 7736 Nonpriority Creditor's Name PO BOX 5609 When was the debt incurred? 12/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent GREENVILLE Texas 75403 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes US DEP ED 4.21 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 5609 When was the debt incurred? 12/2009 Number As of the date you file, the claim is: Check all that apply. Contingent **GREENVILLE** 75403 Texas Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor 1 Linda Sims Case number (if known)

First Nar	me Middle Name Last Name			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting purpose	s on
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$200.00	
	amount here.  6e. Total. Add lines 6a through 6d.	6e.	\$200.00	
	oo. Istan Add Inios od Unioagn od.			
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$2,890.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write	6i.	\$10,162.00	
	that amount here.			
	6i. Total. Add lines 6f through 6i.	6i.	\$13,052.00	

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Fill in this information to identify your case:								
Debtor 1	Linda	Sims						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)					
Case number (If known)								

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or compa	any with whom you have	the contract or lease	State what the contract or lease is for
2.1 Gordon, Shane Name 14305 Parnell Ave	3		Residential Lease, Debtor is Lessee, Yearly Residential Lease
Number Harvey City	Street Illinois State	60426 Zip Code	

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			ournoin rago	
Fill in this info	rmation to identify your c	case:		
Debtor 1	Linda		Sims	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	
(II Idiowij				Check if this is an
				amended filing
Official	Form 106H			
	-			
Schedu	le H: Your Cod	debtors		12/15
known). Answ	er every question.  ave any codebtors? (If y	ou are filing a joint case, do		of any Additional Pages, write your name and case number (if codebtor.)
		lived in a community pro xico, Puerto Rico, Texas, W		( <i>Community property states and territories</i> include Arizona, California, )
	Go to line 3.			
Yes	s. Did your spouse, forme	er spouse, or legal equiva	lent live with you at the ti	me?
<b>✓</b>	No			
	Yes. In which communi	ty state or territory did you	ı live?	Fill in the name and current address of that person.
	Name of your spouse,	former spouse, or legal equ	ivalent	<u> </u>
	Number Street			<del></del>
	City	State	Zip Cod	<u> </u>
2 In Column	n 1 list all afvaur anda	htere. De net include vev	r anguag ag a gadahtar if	your analysis filing with you. List the narron shows in line 2
J. III COIUM	iii i, iist ali ol your code	otora. Do not include you	spouse as a codebtor if	your spouse is filing with you. List the person shown in line 2

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this inform	ation to identify:	VOIL Case.					
		your case.					
Debtor 1 Line	da st Name	Middle Name	Sims Last N	ame			
Debtor 2	er ramo	Wildele Harrie	Lastin	arrio			ock if this is:
(Spouse, if filing) Firs	st Name	Middle Name	Last N	ame		D'	An amended filing
United States Bank	kruptcy Court for	Northern	District of Illi	nois			A supplement showing post-petition chapter 1 expenses as of the following date:
the:			(5	tate)		'	expenses as or the following date.
Case number					_	Ī	MM / DD / YYYY
Official Fo	rm 106l					_	
Schedule		come					12/1
information abou	t your spouse. It pace is needed, n). Answer every	f you are separated and attach a separate she question.	d your spous	se is	not filing w	th you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
1. Fill in your em	ployment		Debtor 1				Debtor 2
information.		Employment status					
•	re than one job,	Employment status	Emplo	•			Employed
•	attach a separate page with information about additional employers.		✓ Not Er	npioy	rea		Not Employed
employers.		Occupation					
Include part tim		Employer's name					
self-employed v		Employer's address					
Occupation ma or homemaker,	y include student if it applies.		Number Str	eet			Number Street
			City		State	Zip Code	City State Zip Code
		How long employed there?					
Part 2: Give D	etails About M	lonthly Income					
spouse unless you If you or your non	are separated.	e more than one employer,	•			employers fo	write \$0 in the space. Include your non-filing or that person on the lines below. If you need
•	• •	ry, and commissions (befo calculate what the monthly		2.	. 01 Det	\$0.00	non-filing spouse
3. Estimate and	d list monthly over	time pay.		3.		+ \$0.00	
4. Calculate gr	oss income. Add lir	ne 2 + line 3.		4.		\$0.00	

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Debto		Sims	Case number	(if	
	First Name Middle Name Li	ast Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Cor	by line 4 here	<b>→</b> 4.	\$0.00	non ming operation	
-	t all payroll deductions:				
	. Tax, Medicare, and Social Security deductions	5a.	\$0.00		
	. Mandatory contributions for retirement plans	5b.	\$0.00		
	Voluntary contributions for retirement plans	5c.	\$0.00		
	. Required repayments of retirement fund loans	5d.	\$0.00		
	Insurance	5e.	\$0.00		
	Domestic support obligations	56. 5f.	\$0.00		
	. Union dues	5g.	\$0.00		
ŭ			\$0.00 +		
				<del></del>	
+5h.	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6.	\$0.00		
7. <b>Cal</b>	culate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$0.00		
8. <b>Lis</b> t	t all other income regularly received:				
8a.	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and				
	the total monthly net income.	8a.	\$0.00		
8b.	. Interest and dividends	8b.	\$0.00		
8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	a			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		
8d.	. Unemployment compensation	8d.	\$0.00		
8e.	Social Security	8e.	\$740.00		
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	8f.	\$1,334.00		
8.0	Pension or retirement income	8g.	\$0.00		
•		8h. +	\$0.00 +		
	Other monthly income. Specify:				
9. Auc	d all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9.	\$2,074.00		
	<b>Iculate monthly income.</b> Add line $7 + \text{line } 9$ . d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	10. ouse	\$2,074.00 +	=	\$2,074.00
In c frie	ate all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of your lands or relatives.  In not include any amounts already included in lines 2-10 or amou	household, your o	dependents, your roomm		
	ecify:	חוט נוומנ מוט ווטנ מ	randolo to pay expenses	iistea iii <i>Scriedule 5.</i> 11. +	\$0.00
<u>—</u>	sony.				Ψ0.00
	dd the amount in the last column of line 10 to the amount in ite that amount on the Summary of Schedules and Statistical Sun				\$2,074.00
					Combined monthly income
13. <b>D</b> o	you expect an increase or decrease within the year after y	ou file this form	?		
J	No.				
	Vec Evalein:				<del></del>
L	Yes. Explain:				

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Debtor 1Linda Sims Case number (if Middle Name First Name Last Name known) Part 2: **Give Details About Monthly Income** Official Form 106I. Additional page. For Debtor 2 or For Debtor 1 non-filing spouse 8f.Other government assistance that you regularly receive. Specify: 1. Food Assistance Programs Income \$15.00

\$1,319.00

2. Other Government Assistance Income

Official Form 106l Schedule I: Your Income page 3

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		Duc	ument Page 37 of 70	J	
Fill in this infor	mation to identify	your case:			
Debtor 1	Linda		Sims		
	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng
United States F	Bankruptcy Court f	or the: Northern	District of Illinois		howing post-petition chapter 13
	Jamapie, Joan	<u></u>	(State)	expenses as of	the following date:
Case number (If known)				MM / DD / YYY	<del></del>
Official	Form 10	 6J			
		Expenses			12/15
information. If (if known). Ans					
1. Is this a joi	nt case?				
✓ No. Go	o to line 2				
_	oes Debtor 2 live	in a separate household?			
	No	•			
-	_	must file Official Forms 106J-2, <i>Expe</i>	enses for Separate Household of Deb	tor 2.	
2 Do you hay	e dependents?	□ No			
Do not list D	-	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you?
			Child	17 years	No.
			Child	1	Yes.
			Child	1 year	Yes.
			Child	19 years	No.
					✓ Yes.
	penses include of people other	<b>✓</b> No			
than	d vour	Yes			
yourself an dependents					
Part 2: Esti	mate Your Ond	joing Monthly Expenses			
Estimate your	r expenses as of	your bankruptcy filing date unless e bankruptcy is filed. If this is a su			
		non-cash government assistance uded it on Schedule I: Your Incom			Your expenses
	I or home owners or the ground or lo	ship expenses for your residence. I	nclude first mortgage payments and		<b>\$323.00</b>
If not incl	luded in line 4:				
4a. Real e	state taxes				4a <b>\$0.00</b>

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Linda
 Sims
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities         6. Utilities           6. Electricity, heat, natural gas         6.         \$260.00           6. Orderphone, culphone, platment, satellite, and cable services         6.         \$140.00           6. Chelephone, culphone, internet, satellite, and cable services         6.         \$140.00           6. Chelephone, culphone, internet, satellite, and cable services         6.         \$140.00           6. Chelephone, culphone, internet, satellite, and cable services         6.         \$140.00           6. Chelephone, culphone, internet, satellite, and cable services         6.         \$140.00           6. Chelephone, culphone, internet, satellite, and cable services         6.         \$140.00           6. Chelephone, culphone, culphone, internet, satellite, and cable services         8.         \$0.00           7. Chell data         6.         \$140.00         \$100.00	First Name	Mildule Name Last Name		
6. Utilities:         6.8. \$260.00           6b. Water, sewer, garbage collection         6b. \$80.00           6b. Water, sewer, garbage collection         6c. \$140.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c. \$140.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6d. \$30.00           7. Food and housekeeping supplies         8. \$0.00           8. Childcare and children's education costs         8. \$0.00           9. Clothing, laundry, and dry cleaning         9. \$120.00           10. Personal care products and services         10. \$800.00           11. Medicial and dental express         11. \$30.00           12. Transportation, Include gas, maintenance, bus or train fare.         12. \$300.00           Do not include car payments         13. \$0.00           14. Charitable contributions and religious donations         13. \$0.00           15. Insurance.         15a         \$0.00           15. Insurance.         15a         \$0.00           15b. Health insurance         15a         \$0.00           15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Vehicle insurance. Specify:         15a         \$0.00           15c. Vehicle insurance.         15a         \$0.00				Your expenses
68. Electricity, heat, natural gas         6a.         \$200.00           60. Water, sewer, garbage collection         6c.         \$140.00           6c. Telephone, call phone, Internet, satellite, and cable services         6c.         \$140.00           6d. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$610.00           8. Childrage and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$120.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$300.00           10. Include car payments         12.         \$300.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15.         \$0.00           15. Lie insurance         15a         \$0.00           15b. Health insurance         15a         \$0.00           15c. Lie insurance         15a         \$0.00           15c. Lie insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00<	5. Additional mortgage paymen	ts for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$60.00           6c. Telephonne, cell phone, Internet, satellite, and cable services         6c.         \$110.00           6d. Other, Specify:         7c.         \$610.00           7c. Food and housekseping supplies         7c.         \$610.00           8c. Childcare and children's education costs         8c.         \$0.00           9c. Clothing, Iaundry, and dry cleaning         9c.         \$120.00           10. Personal care products and services         11c.         \$80.00           11. Medical and dental expenses         11c.         \$30.00           12. Transportation. Include gas, maintenance, bus or train fare.         12c.         \$300.00           10. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         15c.         \$0.00           15. Insurance         15c.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15c.         \$0.00           15c. Vehicle insurance         15c.         \$0.00           15c. Vehicle insurance         15c.         \$0.00           15c. Valide insurance         15c.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or i	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$14.00           6c. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$810.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$12.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$300.00           15. Entertainment, clubs, recreation, newspaers, magazines, and books         13.         \$0.00           15. Entertainment, clubs, recreation, newspaers, magazines, and books         15.         \$0.00           15. Instrainment, clubs, recreation, presspers, magazines, and books         15.         \$0.00           15. Leath insurance         15.         \$0.00	6a. Electricity, heat, natural gas		6a.	\$260.00
6d. Other. Specify         6d. \$8.00           7. Food and housekeeping supplies         7.         \$610.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         10.         \$80.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$300.00           15. Insurance, Do not include care payments         13.         \$0.00           15. Insurance, Include insurance deducted from your pay or included in lines 4 or 20.         15.         \$0.00           15a. Left Insurance         15a.         \$0.00           15b. Health insurance         15a.         \$0.00           15c. Vehicle insurance. Specify:         15a.         \$0.00           15c. Vehicle insurance. Specify:         16         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17c. Taxes apyments for Vehicle 1         17a         \$0.00           17b. Carp payments for Vehicle 2         17b         \$0.00 <td>6b. Water, sewer, garbage colle</td> <td>ection</td> <td>6b.</td> <td>\$60.00</td>	6b. Water, sewer, garbage colle	ection	6b.	\$60.00
7. Food and housekeeping supplies         7.         \$810.00           8. Childrane and childran's education costs         8.         9.00           9. Clothing, laundry, and dry cleaning         9.         \$120.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, include gas, maintenance, bus or train fare.         12.         \$300.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$35.00           15. Insurance.         15a         \$0.00           15. Insurance and thickle insurance deducted from your pay or included in lines 4 or 20.         \$30.00           15c. Vehicle insurance. Specify:         15a         \$0.00           15c. Vehicle insurance. Specify:         16         \$0.00 <td>6c. Telephone, cell phone, Inte</td> <td>ernet, satellite, and cable services</td> <td>6c.</td> <td>\$140.00</td>	6c. Telephone, cell phone, Inte	ernet, satellite, and cable services	6c.	\$140.00
8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$12.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$300.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$35.00           15. Insurance.         15s. Life insurance deducted from your pay or included in lines 4 or 20.         15s. Use insurance         15s. So.00           15b. Health insurance         15c. Vehicle insurance.         15c. Vehicle insurance.         15c. So.00           15d. Other insurance. Specify:         15c. Transport included taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Transport include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           15c. Transport include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17c. Core payments for Vehicle 1         17a.         \$0.00           17a. Car payments for Vehicle 2         17b. Other. Specify: Title Loan         17c. Other. Specify: Title Loan         17d. Other	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning         9.         \$120.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$300.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$35.00           15. Insurance.         15.         \$0.00           15. Insurance.         155.         \$0.00           15. Life insurance deducted from your pay or included in lines 4 or 20.         156.         \$0.00           15. Cybricle insurance.         156.         \$0.00           15. Taxes. Do not included taxes deducted from your pay or included in lines 4 or 20.         \$0.00           16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00           17. Lostaliment or lease payments.         176.         \$0.00           17. Coar payments for Vehicle 1         176. <t< td=""><td>7. Food and housekeeping supp</td><td>lies</td><td>7.</td><td>\$610.00</td></t<>	7. Food and housekeeping supp	lies	7.	\$610.00
10. Personal care products and services       10.       \$80.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$300.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$35.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15b. Health insurance       15a       \$0.00         15c. Vehicle insurance       15c       \$39.00         15c. Vehicle insurance       15c       \$0.00         15c. Vehicle insurance. Specify:       15c       \$0.00         17c. Installment or lease payments for	8. Childcare and children's edu	cation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$300.00         12. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$35.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15b. Health insurance       15b. Health insurance       15c. Vehicle insurance       15c. Vehicle insurance. Specify:       15d.       \$0.00         15c. Vehicle insurance. Specify:       15d.       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15d.       \$0.00         17. Installment or lease payments:       17a.       \$0.00         17a. Cap payments for Vehicle 1       17a.       \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17d.       \$0.00         17c. Other. Specify:       17d.       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).       18.      <	9. Clothing, laundry, and dry cle	eaning	9.	\$120.00
12   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12   3300.00     13   Entertainment, clubs, recreation, newspapers, magazines, and books   13   14   335.00     14   Charitable contributions and religious donations   14   335.00     15   Insurance   15   Insurance   15   15   15   15     15   Insurance   15   15   15   15   15   15   15   1	10. Personal care products and	services	10.	\$80.00
Do not include a payments	11. Medical and dental expense	es	11.	\$0.00
14. Charitable contributions and religious donations       14. \$35.00         15. Insurance.       35.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Health insurance       15b. \$0.00       50.00         15c. Vehicle insurance       15c. \$39.00       50.00         15c. Vehicle insurance. Specify:       15d. \$30.00       50.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       50.00       50.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       50.00       50.00         17. Installment or lease payments.       16       50.00         17. Installment or lease payments.       17a. \$0.00       50.00         17b. Car payments for Vehicle 2       17b. \$0.00       50.00         17c. Other. Specify: _ Title Loan       17c. \$102.00       50.00         17c. Other. Specify: _ Title Loan       17c. \$102.00       18.         19. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Specify: _       19. \$0.00         20. Other payments you make to support others who do not live with you.       19. \$0.00         Specify: _ <td< td=""><td>_</td><td>maintenance, bus or train fare.</td><td>12.</td><td>\$300.00</td></td<>	_	maintenance, bus or train fare.	12.	\$300.00
15. Insurance.	13. Entertainment, clubs, recre	ation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.	14. Charitable contributions an	d religious donations	14.	\$35.00
15b		cted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance   15c   \$39.00     15d. Other insurance. Specify:	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:			15c	\$39.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments:       \$0.00         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify: Title Loan       17c       \$102.00         17d. Other. Specify: Title Loan       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20a. Mortgages on other property       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00	16. Taxes. Do not include taxes d	educted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify: Title Loan       17c. \$102.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: Title Loan 17c. Other. Specify: Title Loan 17d. Other. Specify: 17d. Other. Specify: 17d. Specify: 18d. Specify: 18d. Specify: 18d. Specify: 18d. Specify: 18d. Specify: 18d. Specify: 19d.	17. Installment or lease paymen	nts:		
17c. Other. Specify: Title Loan  17d. Other. Specify: 17d \$102.00  17d. Other. Specify: 17d \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			17a	\$0.00
17d. Other. Specify: 17d \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00  20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17b. Car payments for Vehicle	2	17b	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. Property, homeowner's, or renter's insurance  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	17c. Other. Specify: Title Loa	1	17c	\$102.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19.Other payments you make to support others who do not live with you.  Specify:  20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	17d. Other. Specify:		17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20c \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00				\$0.00
Specify:		· · · · · · · · · · · · · · · · · · ·	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Schedule I: Your Income. 20a \$0.00 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	, , ,	support others wile do not live with you.	19	\$0.00
20a. Mortgages on other property20a\$0.0020b. Real estate taxes.20b\$0.0020c. Property, homeowner's, or renter's insurance20c\$0.0020d. Maintenance, repair, and upkeep expenses.20d\$0.00		s not included in lines 4 or 5 of this form or on Schedule I: Your Income.	10.	
20b. Real estate taxes.  20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	20b. Real estate taxes.		20b	\$0.00
	20c. Property, homeowner's, o	or renter's insurance	20c	\$0.00
20e. Homeowner's association or condominium dues 20e \$0.00	20d. Maintenance, repair, and	upkeep expenses.	20d	\$0.00
	20e. Homeowner's association	or condominium dues	20e	\$0.00

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Debtor 1			Sims	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	r. Specify:				21	\$0.00
22 Calc	ulate your monthly ex	nenses				
	Add lines 4 through 21.	•				\$2,069.00
	Copy line 22 (monthly e		\$0.00			
	Add line 22a and 22b. T		\$2,069.00			
			22.			
	late your monthly net					
23a. (	Copy line 12 (your com	bined monthly income) from	Schedule I.		23a	\$2,074.00
23b. (	Copy your monthly exp	enses from line 22 above.			23b	\$2,069.00
23c. Subtract your monthly expenses from your monthly income.						\$5.00
•	The result is your mont	hly net income.			23c	
mort		to finish paying for your car l ase or decrease because of a r				

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Linda	Sims	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern	District of Illinois
Case number	,		(State)

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and						
	that they are true and correct.							
×	/s/ Linda Sims	*						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 12/20/2017	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill in this	information to	identify your o	case:					
Debtor 1	Linda			Sims				
Debtor 2	First Nar	me	Middle I	Name Last Nam	ne			
(Spouse, if fil	ling) First Nar	ne	Middle I	Name Last Nam	ne	-		
United Sta	ates Bankruptcy	Court for the:	Northern	District of Illino	ois	_		
Case num	nber			(Sta	te)			
(If known)	·							Check if this is a
Offici	al Form	107						amended filing
Stater	ment of	 Financia	al Δffairs f	or Individuals	Filing fo	r Bankru	intev	04/1
				arried people are filing				
informati	on. If more s	pace is neede	ed, attach a sep	arate sheet to this form				
number (i	if known). An	swer every q	uestion.					
Part 1:	Give Details	About Your	Marital Status	and Where You Lived	Before			
1. Wh	at is your curr	ent marital st	atus?					
П	Married							
	Not married							
2. Dur	ring the last 3	vears have vo	ou lived anywhere	e other than where you li	ve now?			
	_	yours, nave yo	ou mou unymnon	othor than whore you h				
	No Yes. List all o	f the places vo	ou lived in the las	3 years. Do not include	where vou live	now.		
		, , ,		,	, , ,			
	Debtor 1:			Dates Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived
				there				there
					Same	as Debtor 1		Same as Debtor 1
	14531 S. Eme	erald Ave		-				_
	Number Stree	t		From To	Number St	reet		From To
	Riverdale	Illinoio	60907					
	City	Illinois State	60827 Zip Code		City	State	Zip Code	
					Same	as Debtor 1		Same as Debtor 1
				F				F
	Number Stree	t		From To	Number St	reet		From To
					•			
	City	State	Zip Code		City	State	Zip Code	
2 /4/:+-	in the leet 0	are did voi: a	vor livo with a a-	oueo or logal aguivalant	in a commi	ty property of a	o or torritory?	Community property states
				ouse or legal equivalent iana, Nevada, New Mexico				
<b>₩</b>	No							
	Yes. Make sur	e you fill out S	chedule H: Your	Codebtors (Official Form	106H).			

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Sims Debtor 1 Linda Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) Est. YTD SSI \$8,140.00 From January 1 of current year until Est. YTD Link \$3,245.00 the date you filed for bankruptcy: Est. YTD Foster Care Income \$11,069.00 YTD Gross SSI \$8,880.00 For last calendar year: YTD Link \$4,800.00 (January 1 to December 31, 2016 YTD Foster Care \$10,668.00 Income \$8,880.00 YTD Gross SSI For the calendar year before that: YTD Link \$4,800.00 (January 1 to December 31, 2015 YTD Foster Care Income \$10,668.00

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Sims Debtor 1 Linda \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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ebtor 1	Linda			Sin	าร	Case number	(if known)
	First Name		Middle Name	Las	t Name		
Insi con age	ders include your rela corations of which y	atives; any g ou are an of a business	jeneral partners; ficer, director, p	relatives of any e erson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider?  /ou are a general partner; g securities; and any managing r domestic support obligations,
<b>V</b>	No						
Ħ	Yes. List all payme	ents to an ir	nsider.				
	, ,			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City St	ate	Zip Code				
	Insider's Name						
	Number Street						
	City St	ate	Zip Code				
-	Oity	ate	Zip Oode				
insi	der? ude payments on de No Yes. List all payme	bts guarant	eed or cosigned	l by an insider.	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name						
	Number Street						
	City St	ate	Zip Code				
	Insider's Name						
	Number Street						
	City St	ate	Zip Code				
	Unity Of	alo					

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Debtor 1 Linda Sims Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	otor 1 Linda	Sims	Case number (if known)	
	First Name Middle Name	Last Name		
11.	Within 90 days before you filed for bankruptogaccounts or refuse to make a payment becau		ank or financial institution, set off any amo	ounts from your
	✓ No ☐ Yes. Fill in the details.			
		Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account	number: XXXX-	
	City State Zip Code			
12	Within 1 year before you filed for bankruptcy,		nossession of an assignee for the benefit o	foreditors a court-
12.	appointed receiver, a custodian, or another o		possession of an assignee for the benefit of	r creditors, a court-
	✓ No			
	Yes			
Part	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto	y, did you give any gifts with a t	otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	0 Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			-
	Number Street			
	City State Zip Code Person's relationship to you			
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code Person's relationship to you			
	. Groom a raidilationing to you			

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Debt			Sims	Case number (if known)	
		First Name Middle Name	Last Name		
14.	Wit	hin 2 years before you filed for bankruptcy,	, did you give any gifts or contribւ	tions with a total value of more than \$6	00 to any charity?
	<b>V</b>	No			
	Ħ	Yes. Fill in the details for each gift or contri	ibution		
	Ш	res. I ill ill the details for each gift of contri	ibation.		
		Gifts or contributions to charities	Describe what you contr		Value
		that total more than \$600		contributed	
					_
		Charity's Name	<del></del>		
		Smarry Smarris			
		Name of Character	<del></del>		
		Number Street			
		City State Zip Code	<del></del>		
		City State Zip Code			
Danis	٥.	List Cortain Lagge			
Part	6:	List Certain Losses			
15.		nin 1 year before you filed for bankruptcy o	or since you filed for bankruptcy, o	lid you lose anything because of theft, f	re, other disaster, or
	gan	ibling?			
	<b>V</b>	No			
	H				
	Ш	Yes. Fill in the details.			
		Describe the property you lost and	Describe any insurance	coverage for the loss Date of you	r Value of property
		how the loss occurred	Include the amount that in		lost
			pending insurance claims	on line 33 of <i>Schedule</i>	
			A/B: Property.		
					<u> </u>
Part	7:	List Certain Payments or Transfers			
		ut seeking bankruptcy or preparing a bank ude any attorneys, bankruptcy petition prepare No Yes. Fill in the details.		services required in your bankruptcy.	
	Ľ		Barrier and all and		
					mb American of
			Description and value of	or transfor	
			transferred	or transfer	nt Amount of payment
		Convert Law Firm	transferred	was made	payment
		Semrad Law Firm			
		Person Who Was Paid	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue	transferred	was made	payment
		Person Who Was Paid	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street  City State Zip Code	transferred	was made	payment
		Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street	transferred	was made	payment

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Debt		Linda		Sims	Case number <i>(if known)</i>	) <u> </u>	
		First Name	Middle Name	Last Name			
	help	hin 1 year before you filed by you deal with your credit not include any payment or	tors or to make paym		half pay or transfer	any property to a	anyone who promised to
	<b>✓</b>	No Yes. Fill in the details.					
				Description and value of any protransferred	perty	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
	<b>the</b> Incl	ordinary course of your bu	usiness or financial af and transfers made as s	ecurity (such as the granting of a secur			
				Description and value of proper transferred		y property or eceived or debts p	Date transfer was made
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
	ben	hin 10 years before you file eficiary? ese are often called asset-pro No		l you transfer any property to a self-	settled trust or sim	ilar device of whi	ich you are a
		Yes. Fill in the details.		Description and value of the m	vomoutivi tvomofoveo d		Data
				Description and value of the pr	operty transferred		Date transfer was made
		Name of trust					<del></del>

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Sims Debtor 1 Linda Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Sims Debtor 1 Linda Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb	tor 1				Sims		Cas	se number <i>(ii</i>	known)		
		First Name		Middle Name	Last	Name					
26.		e you been a part	y in any judio	cial or administ	rative proceed	ding under	any environmer	ntal law? In	clude settlen	nents and orde	ers.
	씜	No Yes. Fill in the det	tails.								
	_				Court or ager	тсу		Nature o	of the case		Status of the
		Case title									case
					Court Name						Pending
		Case number			Number Street						On appeal
		Case Humber									Concluded
		•			City	State	Zip Code				
Pari	t 11:	Give Details Al	oout Your E	Business or C	onnections t	o Any Bu	siness				
27.	With	nin 4 years before	you filed for	bankruptcy, di	d you own a bi	usiness or	have any of the	following c	onnections to	o any business	?
		A sole propri	etor or self-e	employed in a tr	ade, professio	n, or other	activity, either f	ull-time or p	oart-time		
		A member of	f a limited lial	oility company (	LLC) or limited	l liability pa	rtnership (LLP)				
		A partner in a	a partnership	)							
		An officer, di	rector, or ma	anaging executi	ve of a corpor	ation					
				of the voting or e	•		ooration				
		_									
	<b>✓</b>	No. None of the a									
		Yes. Check all that	at apply abo	ve and fill in the	details below	for each b	ousiness.				
					Describ	e the natu	ire of the busine	ess		dentification n	
									EIN:	oral Goodiney III	
		Business Name									
		Number Street							Dates busi	ness existed	
		City	State	Zip Code	mame d	or account	ant or bookkeep	ber	From	То	
					Describ	e the natu	ire of the busine	ess		dentification n cial Security n	
		Business Name							EIN:		
					_				Datast		
		Number Street			Name o	of account	ant or bookkeep	er	Dates busii	ness existed	
		City	State	Zip Code	_				From	To	
					Describ	e the natu	ire of the busine	ess		dentification n	
		Business Name							EIN:		
		Number Street			Name o	of accounts	ant or bookkeep	per	Dates busii	ness existed	
		City	State	Zip Code		account	or 200kkoep		From	То	

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Deb	tor 1 Linda				Sims	Case number (if known)
	First Na	me		Middle Name	Last Name	
28.	creditors,	ears before y or other part -ill in the deta	ies.	bankruptcy, did yo	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	L Tes.	III III IIIe dela	iis below.			
					Date issued	
	Nam	2			MM/DD/YYYY	
	INdili	5			141141/00/1111	
	Num	ber Street			_	
	City		State	Zip Code	_	
Par	. 40. Sign	Below				
		cy case can r	esult in fine			rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ L	inda Sims	1		Signature of Debtor 2
		Signatur	re of Debtor	I		
		Date 12	/20/2017			Date
	Did you att	oh additiona	l nagge to \	our Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
		icii auditiolia	ii pages to	our Statement or	rilialicial Alialis loi iliulvi	duals Filling for Bankruptcy (Official Form 107):
	<b>✓</b> No					
	Yes					
	Did you pay	or agree to p	oay someon	e who is not an at	torney to help you fill out	pankruptcy forms?
ı	<b>√</b> No					
	_	me of person				Attach the Bankruptcy Petition Preparer's Notice,
	L 100.140	ino or poloon				Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	Linda		Sims	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number (If known)			(	

Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Title Max Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Plymouth Grand Voyager Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor			Sims	Case number	(if
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired P	ersonal Property Lease	es		
				ry Contracts and Unevni	red Leases (Official Form 106G), fill in the
informa	tion below. Do not list rea		leases are leases tha	it are still in effect; the l	ease period has not yet ended. You may
Des	scribe your unexpired pers	sonal property leases			Will the lease be assumed?
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
0.0	Sign Below				
Part 3:	Sign below				
	er penalty of perjury, I declerty that is subject to an u		my intention about an	y property of my estate t	that secures a debt and any personal
•	/s/ Linda Sims		×		
_	gnature of Debtor 1		<u> </u>	ignature of Debtor 2	
إا	gnature or Debtor 1		5	griature of Debitol 2	
Da	ate 12/20/2017 MM/DD/YYYY		D	Date MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

		Northern L	District of Illinois	
In re	Linda Sims		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
			TION OF ATTORNE	
1.	<ul> <li>Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf</li> </ul>	year before the filing of	of the petition in bankruptcy, or agi	reed to be paid to me, for services
	For legal services, I have agreed to ac	ccept		\$1,500.00
	Prior to the filing of this statement II	have received		\$0.00
	Balance Due			\$1,500.00
2.	. The source of the compensation paid	d to me was:		
	<b>✓</b> Debtor	Other (sp	pecify)	
3.	. The source of the compensation paid	d to me is:		
	<b>✓</b> Debtor	Other (sp	pecify)	
4.	I have not agreed to share the abmembers and associates of my li		nsation with any other person unle	ss they are
		v firm. A copy of the a	ion with a other person or persons greement, together with a list of the	
5.	. In return for the above-disclosed fee	, I have agreed to rend	er legal service for all aspects of the	e bankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's finar bankruptcy;</li> </ul>	ncial situation, and ren	dering advice to the debtor in deter	mining whether to file a petition in
	b. Preparation and filing of any	petition, schedules, st	atements of affairs and plan which	may be required;
	c. Representation of the debtor	at the meeting of cred	itors and confirmation hearing, and	d any adjourned hearings thereof;
6.	. By agreement with the debtor(s), the	above-disclosed fee d	oes not include the following servi	ces:
		CER	TIFICATION	
	certify that the foregoing is a completor(s) in this bankruptcy proceedings.	te statement of any ag	reement or arrangement for payme	nt to me for representation of the
	12/20/2017		/s/ Alicia Haro	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

		filing fee administrative fee
+	<u> </u>	
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Sims, Linda	Case No	
Debtor(s)			
		Chapter.	Chapter7
	VERIFIC	ATION OF CREDITOR MAT	RIX
Ti knowledge	he above named Debtors hereby verify e.	that the attached list of creditors is tr	ue and correct to the best of their
Date:	12/20/2017	/s/ Sims, Linda Sims, Linda Signature of Deb	

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

NCA P.O. BOX 550 327 WEST FOURTH STREET HUTCHINSON, KS, 67504

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA, KS, 67205

ARS ACCOUNT RESOLUTION PO BOX 459079 Fort Lauderdale, FL, 33345

MIDNIGHT VELVET PO Box 740933 Dallas, TX, 75374

DIVERSIFIED Po Box 1391 Southgate, MI, 48195

GRT SUB ACC 1645 Ogden Downers Grove, IL, 60515

US DEP ED PO Box 8937 Madison, WI, 53708

NHHELC/GSM&R PO BOX 3420 CONCORD, NH, 03302 AARON SALES & LEASE OW 6071 Broadway Merrillville, IN, 46410

Title Max 6319 Northwest Hwy Crystal Lake, IL, 60014

IRS Po Box 7346 Philadelphia, PA, 19101

Cash Advance Inc. 25954 Eden Landing Rd Hayward, CA, 94545

Family Christian Health Center 713 E. 143rd St Dolton, IL, 60419

## CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,500.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 12/20/20/17

Client WAR SMC Clien

Attorney alian Haro

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Debtor 1 Linda First Name		Sims Car Last Name	se number (if known)	
	estions for Reporting Purpose:			
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individua No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily	y consumer debts? Consulal primarily for a personal, far y business debts? Business investment or through the consultance of th	amily, or household as debts are debts the operation of the bus	purpose." at you incurred to obtain siness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that f		any exempt property bute to unsecured cre	is excluded and administrative editors?
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$1	0 million 00 million 00 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$8	0 million 00 million 00 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	I have average and this matthing and			
	I have examined this petition, an correct.  If I have chosen to file under Chapter 11, United States Code. I under Chapter 7.  If no attorney represents me and out this document, I have obtain I request relief in accordance wit I understand making a false state connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1	napter 7, I am aware that I m I understand the relief avail of I did not pay or agree to paned and read the notice requent th the chapter of title 11, Ur ement, concealing property ase can result in fines up to	nay proceed, if eligible able under each char ay someone who is uired by 11 U.S.C. § nited States Code, so y, or obtaining mone	le, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill 342(b). Specified in this petition.
	/s/ Linda Sims Signature of Debtor 1	enda Sinis *	Signature of Debtor	2
n forest for distance translated a finding and service decreases from a finite service of the se	Executed on 12/20/2017 MM / DD	/ <u>/</u>	Executed on	MM / DD / YYYY

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	THE METAL STATE OF A STATE OF A				
Fill in this info	rmation to identify your o	ease:			
Debtor 1	Linda		Sims		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	<u> </u>	
"					
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)		CONTRACTOR OF THE CONTRACTOR O	(Glale)		
Official	Form 106De	<u>₽C</u>			Check if this is at amended filing
Declarat	tion About an	Individual Debt	or's Schedules	<b>;</b>	12/1
If two married	people are filing togeth	er, both are equally respo	nsible for supplying correc	t information.	
money or prop	erty by fraud in connect 1341, 1519, and 3571.	ion with a bankruptcy cas	e can result in fines up to	aking a false statement, concealing p \$250,000, or imprisonment for up to	20 years, or both. 18
Did you p	pay or agree to pay some	one who is NOT an attorn	ey to help you fill out bank	cruptcy forms?	
<b>☑</b> No					
Yes.	Name of person		Attach Bankruptcy F Signature (Official Fe	Petition Preparer's Notice, Declaration, an orm 119).	d
	nalty of perjury, I declar are true and correct.	e that I have read the sum	mary and schedules filed	with this declaration and	
/s/ Linda		ala Smell	Signature	of Debtor 2	-
Date 12/2			Date	07 - 0010. to	

MM/DD/YYYY



MM/DD/YYYY

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Debtor	1 Linda		Sims	Case number (if known)
(00-000-0000000000000000000000000000000	First Name	Middle Name	Last Name	
	ithin 2 years before editors, or other pa No Yes. Fill in the det	rties.	you give a financial state	ment to anyone about your business? Include all financial institutions,
L.	1 100.1 1111111111111111111111111111111	allo Bolovi.	Date issued	
			Date Issued	
	Name		MM/DD/YYYY	_
	Number Street		<del></del>	
	City	State Zip Code		
Part 12	Sign Below			
true	and correct. I under inkruptcy case can	erstand that making a false st result in fines up to \$250,000 Linda Sims	atement, concealing pro	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signati	ure of Debtor		Signature of Debtor 2
	Date 1	2/20/2017		Date
Did y	you attach addition	al pages to Your Statement o	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agree to	pay someone who is not an a	ttorney to help you fill ou	t bankruptcy forms?
7	No			
	Yes. Name of person	·		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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ebtor Linda		Sims	Case number (if
First Name	Middle Name	Last Name	known)
2: List Your Unexpired	l Personal Property Leas	es	
ormation below. Do not list i	perty lease that you listed i real estate leases. Unexpire property lease if the trustee	d leases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired p	ersonal property leases		Will the lease be assumed?
Lessor's name:	·		□ No □ Yes
Description of leased property:			<b>L</b>
Lessor's name:	erri k. 100 k	ERRORAN OLDER AT TO THE TOTAL OF THE TOTAL OLDER TO THE TOTAL OLDER TOTAL OLDER TO THE TOTAL OLDER TO THE TOTAL OLDER TOT	☐ No ☐ Yes
Description of leased property:			
Lessor's name:		ren kalan sakan makemban sa MASA kalan kalan kalan kalan kalan kalan sa kalan sa kalan sa kalan sa kalan sa ka Kalan kalan kalan sa kalan sa kalan kalan sa kalan sa kalan sa kalan sa kalan kalan sa kalan sa kalan sa kalan	No Yes
Description of leased property:			<del></del>
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			☐ No ☐ Yes
Description of leased property:			<del></del>
Lessor's name:			☐ No ☐ Yes
Description of leased property:			bood
Lessor's name:	and the second second second representation of the control of the second second second second second second sec	genger rang on pagrama i growg raman ng awar naman at anuan at an an in in in	☐ No ☐ Yes
Description of leased property:			· · · · · · · · · · · · · · · · · · ·
3: Sign Below	erna erna o viziana erika arek o vizian pransa propia eriko doversa propia erik	kalanaka kanamaka ne ing nangularah ina uni da agi u	ya ya mwelanciatawa Mambela da anazirali a ku bu bu bu du bu bu bu ban sa bala ba bu bu mbu bu bu bu ka ka ba
nder penalty of perjury, I de roperty that is subject to ar		my intention about any p	roperty of my estate that secures a debt and any personal
/s/ Linda Sims Signature of Debtor 1	Kenda Sins	<b>★</b> Sign	ature of Debtor 2
Date 12/20/2017 MM/DD/YYYY		Date	

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Sims, Linda  Debtor(s)	Case No							
		Chapter.	Chapter7						
	VERIFICA	TION OF CREDITOR MATRIX	x						
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their nowledge.								
Date:	12/20/2017	/s/ Sims, Linda	Senso Sens						
		Sims, Linda Signature of Debtor							

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Debtor 1 Linda First Name	Middle Name	Sims Last Name	Case number (if know	/n)	
i not italit	IAUMANG IAUTHO	LESS (101110	Column A Debtor 1	Column B Debtor 2 or non-filing spous	•
8. Unemployment compensation Do not enter the amount if you under the Social Security Act. It	contend that the amount re		\$0.00		
For you	er er en	\$740.00			
For your spouse		\$0.00			
Pension or retirement incombenefit under the Social Securit		unt received that was a	\$0.00		_
10.Income from all other source amount. Do not include any be payments received as a victim of international or domestic terroric page and put the total below.	enefits received under the So of a war crime, a crime agair	ocial Security Act or est humanity, or			
Other Government Assistance			\$1,334.00		
Total amounts from separate p	anes if any		+\$0.00	+	
rota amounts nom separate p	ages, ii arry.				
11. Calculate your total curren	t monthly income. Add lin	es 2 through 10 for	\$1,334.00 <b>+</b>		\$1,334.00
each column. Then add the total f	or Column A to the total for	Column B.			
				t	Total current
					monthly incom
Part 2: Determine Whether	the Means Test Applie	es to You			
2. Calculate your current mont					F1
12a. Copy your total current m	onthly income from line 11.		Copy li	ine 11 here →	\$1,334.00
Multiply by 12 (the numb	er of months in a year).				X 12
12b. The result is your annual i	ncome for this part of the fo	om.		12	2b. <u>\$16,008.00</u>
		- " " .			
3 Calculate the median family	income that applies to yo				
Fill in the state in which you live	<b>).</b>	Illinois			
Fill in the number of people in y	your household.	4			
					10
Fill in the median family income household.	e for your state and size of			and the second of the second	13. \$94,472.00
To find a list of applicable medi instructions for this form. This					<u> </u>
4. How do the lines compare?					
14a. Line 12b is less than Go to Part 3.	or equal to line 13. On the t	op of page 1, check box 1	, There is no presumption of a	abuse.	
14b. Line 12b is more that Go to Part 3 and fill o	n line 13. On the top of pag ut Form 122A-2.	e 1, check box 2, The pre	sumption of abuse is determine	ed by Form 122A-2.	
art 3: Sign Below					
artor oight boton					
By signing here, I declare und	or populty of porium that the	information on this stater	nent and in any attachments is	true and correct	
by organing more, i decrare dilu	a positive or perjury trially re	, on the state	and in any addominorito to		
🗶 /s/ Linda Sims	was Am	·/ ×			
Signature of Debtor 1	W10-4 00.10	<u> </u>	ignature of Debtor 2		The second secon
Date 40/00/0047		г	Osto 12/20/2017		
Date 12/20/2017 MM/DD/YYYY		L	Date 12/20/2017 MM/DD/YYYY		
TALL SEE SEPT C. F. F. F.					
If you checked line 14a, do	NOT fill out or file Form 122 out Form 122A-2 and file it				